

THE (UN)HEALTHY POOR: WEALTH, POVERTY, MEDICINE AND HEALTH CARE IN THE GRECO-ROMAN WORLD*

I Bonati (North-West University)

This article explores the connection between the theme of wealth/poverty and medicine in Greco-Roman Antiquity. Special attention is devoted to the changes implied by the transition towards Christianity. The Church has played a fundamental role in the creation of an organized system to assist the sick and needy through the establishment of ‘hospitals’. The socio-cultural impact of this topic promotes an interdisciplinary approach based on literary, papyrological and archaeological evidence. In particular, Greek papyri from Egypt provide original information on structures for medical care, philanthropic programs and charitable institutions in the cities and villages of the Egyptian *chora*.

Keywords: ancient medicine; Greek papyri; health care; hospitals; Late Antique Christianity.

Health and wealth, or at least wellness, are today interrelated concepts, but they also went hand in hand in the ancient world. The purpose of this article is to examine some relevant aspects and phenomena linked to the connection between the complex theme of wealth — and notably poverty — and medicine in Greco-Roman Antiquity.¹ First, attention will be given to the approaches to healing in the Greco-Roman world, ranging from the Greek learned and ‘rational’ medicine to a variety of popular, less-specialized or technical practices, and the social composition of their target audience and clientele. The focus is especially on the alternatives available to the lower classes when struck by illness. Then, the emphasis will be on Late Antique Christianity. The markedly Christian value of charity results in a deeper sensitivity to the connection between poverty and illness than in pre-Christian time. Although institutions involved in the provision of medical care existed already before the rise of Christianity, such as the Ἀσκληπιεῖα in ancient Greece and the *valetudinaria* in the Roman world from the age of Augustus, only the transition towards Christianity led to the creation of a well-

* This article is an expansion and refinement of the paper that I presented at the 32nd *Biennial Conference of the Classical Association of South Africa ‘Poverty and wealth’* (Centurion, 26-29 October 2017).

¹ Studies particularly useful to address these issues are: Marino, Molè & Pinzone 2006 on the connection between poverty and illness in Late Antiquity; Atkins & Osborne 2006 about poverty in the Roman world; Holman 2001 on poverty in the 4th century Christian theology and 2008 on poverty and wealth in early Church and society.

organized health care and assistance system, mostly from the 4th century CE. These remarkable changes in the health care were architecturally translated in the erection of ‘hospitals’, which can be considered as the most significant medical achievement of Late Antiquity. Among the terms used to describe these institutions in Greek texts, *πτωχεῖον* and *πτωχοτροφεῖον* (‘place for the care of the destitute’) are particularly noteworthy since they explicitly connect poverty and sickness. To provide an attentive reconstruction of this incipient tradition of health care and medicine in Late Antique Christianity and to point out its socio-cultural significance, this article uses an interdisciplinary approach based on the study of different primary sources: papyri, literary passages, archaeological evidence and inscriptions.

Poverty and illness in the Greco-Roman world

Before exploring the relationship between poverty and treatment of illness in the Greco-Roman world, it can be worth remembering that when we talk about medicine in Greco-Roman Antiquity we refer to a medicine essentially Greek.² It is scholarly well established that at the time when Greek medicine was systematized and codified as a science and *technē* by Hippocrates and the Hippocratic authors (5th-4th century BCE), the healing practice in Rome still consisted of supernatural beliefs, magical rites and popular practices. Greek medicine was introduced in Rome largely after the Roman conquest of Greece, when many Greek doctors reached Rome as prisoners of war. Then, they found in Rome a favorable context to establish their activity.³ These Greek doctors not only transplanted their store of medical knowledge from the *Hippocratic Corpus* onwards but also the latest innovations from Alexandria, which became an intellectual capital during the Ptolemaic period and was at the forefront in the field of medicine thanks to the rise of knowledge of human anatomy. In this way, Greek medicine was incorporated

² On medicine in the Greco-Roman world, see especially Nutton 1992:15-58 and 2004, as well as Andorlini & Marcone 2004.

³ This process is well summarized by Israelowich 2016:229: ‘Professional physicians first appeared in Rome in the last decades of the third century BCE in the form of Greek doctors. From the time of their initial arrival, the city of Rome attracted Greek physicians who found the upper tiers of the Roman society of the late Republic favourably disposed towards Greek culture and its agents. It was in this context that Greek physicians initially established themselves in Rome. However, until the decline of the Republic the Roman state was indifferent to their practice and vocation. The turning point was legislation aimed to attract physicians to Rome by offering them citizenship and immunity from civic duties, which began with Julius Caesar and continued with Augustus and the following emperors’.

into Roman society and spread across Western Europe, as effectively described by Nutton (2004:157):

The assimilation of Greek medicine into the Latin-speaking world of central Italy, and thence over time into Western Europe, is one of the most momentous developments in the history of medicine. A system (or a collection of systems) of medicine in one society was transplanted into another with a different language, culture and political structure, and was enabled thereby to become the basis of the Western medical tradition. Without this development Greek medicine might have remained [...] an interesting, if somewhat tangential, object of historical study. In Latin dress, Greek medical theories continued to be studied, applied, challenged and defended in Western Europe well into the 19th century.

The scenario of Greco-Roman healthcare is rather a labyrinth than a uniform landscape. The ancient approach to healing is not an undifferentiated and unidirectional phenomenon. Alongside the ‘rational’ or ‘rationalistic’⁴ medicine (*iatrike*) practiced by learned doctors and renowned physicians of Greek origins or culture (*iatroi* or *medici*),⁵ there was a complex and diverse spectrum of healing practices that can be defined as alternative healing methods,⁶ ranging from magical practices to the so-called ‘popular’ medicine.⁷ Although there was a demarcation line between these ‘categories’ and their respective procedures, it is not a strict and sharp one.⁸ It is also hard to establish with a high degree of certitude who turned to

⁴ Definition preferred by Harris 2016b:1-5, 7, and *passim*.

⁵ Cf. Longrigg 1993. On the cultural importance of rational medicine, see p. 1: ‘One of the most impressive contributions of the ancient Greeks to Western culture was their invention of rational medicine. It was the Greeks who first evolved rational systems of medicine for the most part free from magical and religious elements and based upon natural causes. The importance of this revolutionary innovation for the subsequent history of medicine can hardly be overstressed. Here for the first time in the history of medicine was displayed a strikingly rational attitude which resulted in a radically new conception of disease whose causes and symptoms were now accounted for in purely natural terms’.

⁶ For a view on these practices through the evidence of the papyri, cf. Bonati 2020:§1. See also Draycott 2012.

⁷ Cf. Harris 2016a. For a definition, see p. VII: ‘Those practices aimed at averting or remedying illness that are followed by people who do not claim expertise in learned medicine (Gk. *iatrike*) and do not surrender their entire physical health to professional physicians (Gk. *iatroi*)’.

⁸ See Harris 2016b:1-64 and in particular pp. 7, 15 and 21 for this aspect. As the author points out, ‘No very clear-cut lines then between one kind of medicine and the other, that seems to be the accepted view. And it is easy to find instances of rationalistic doctors recommending or approving procedures that by our lights have no rational basis

whom to be healed.⁹ To assume that Greek rational medicine was only reserved for the rich elite is speculative rather than demonstrated. Likely, the members of the social elite turned first to ‘rational’ doctors when seriously ill, but they could also be susceptible to the advice of other, more ‘popular’ healers.¹⁰ On the other side, it is not excluded *a priori* that also the lower classes could turn to *medici* or *iatroi*, but the point is that their service had to be paid and their fees could not be cheap.¹¹ There is no evidence that doctors used to waive their fees in case their patients were poor, so only wealthy people could afford to pay large sums for medical care and for many of the treatments that were recommended by the ancient medical authors.¹² Thus, it sounds like a plausible assumption that people in the lower or even middle sections of society necessarily had to turn to ‘non-elite’ remedies and practices (see *infra*).¹³

Furthermore, we can observe that Greek medical writers make often mention to diseases connected with the lifestyle of the elite, characterized by overeating, exaggerated ingestion of certain food, alcohol consumption, and lack of physical activity; among them, especially gout (ποδάγρα), once known as ‘the disease of kings’, and obesity (πολυσαρκία),¹⁴ which was conceived as an actual illness.¹⁵ Conversely, less attention seems to be paid to maladies and therapies of diseases that struck the lower classes, as well as to the ordinary conditions of poverty as a cause of illness. Sometimes classical authors point to the idea of

at all, apart from possible placebo effects’ (12); ‘even illustrious members of the profession sometimes strayed outside the limits of therapies that the stricter members observed’ (13); ‘much of the healthcare offered by the most prestigious ancient doctors outside the realms of trauma care and surgery was indeed by modern standards highly irrational’ (15); ‘a great deal of Hippocratic medicine, and a fair amount of later elite medicine too, was in fact “popular” in the sense that it stemmed, without much admission to this effect, not from anatomical investigation or experimental results, but rather from centuries-long, perhaps even millennia-long, or relatively brief processes of trial and error carried out by interested amateurs’ (23).

⁹ Cf. Harris 2016b:35-51.

¹⁰ Cf. Harris 2016b:40-41.

¹¹ Cf. Cohn-Haft 1956:32-45; Harris 2016b:45.

¹² Cf. Harris 2016b:45 with examples and bibliography. See also p. 54: ‘The authors of our texts clearly had in view patients who were able to pay high prices, or who in desperation were willing to do so’.

¹³ Cf. Harris 2016b:46 and 51: ‘The free poor will seldom of course have had access to orthodox physicians, and none to hospitals. Occasionally a physician might act gratis, but there were no social favours or honorific inscriptions to be won by helping the indigent’.

¹⁴ Cf. e.g., Ar. *Plut.* 559-560 παρὰ τῷ μὲν γὰρ ποδαγρῶντες / καὶ γαστρῶδεις καὶ παχύρηνιμοι καὶ πίνοντες εἰσιν ἀσελγῶς.

¹⁵ Cf. Gourevitch 1985:195-215; Guggenheim 1988:555-586; Neri 2006:88-93.

wealth as good health and poverty as illness,¹⁶ or, in general, to the connection between being poor and being sick. The gnomic end of a fragment of Sophocles' *Creusa* (fr. 354.5-7 R) may serve as a meaningful example:

εἰσὶ δ' οἵτινες
αἰνοῦσιν ἄνοσον ἄνδρ'· ἐμοὶ δ' οὐδείς δοκεῖ
εἶναι πένης ὢν ἄνοσος, ἀλλ' ἀεὶ νοσεῖν.

There are those who exalt the man free from sickness, but it seems to me that no poor man is free from sickness: he is always sick.

Scanty traces of diseases explicitly affecting the poor remain in the extant medical literature, although elements in the context suggest that they are afflictions more recurring in the lower social classes. Galen, in particular, highlights several times the health consequences of undernutrition and its role in the *genesis* of severe diseases.¹⁷ For instance, in *De bon. mal. suc.* 1 (VI 749.1-752.7 K) he describes the repercussions of a long-lasting famine (λιμός) pointing out that poor nutrition based on wild plants, roots, seeds, and similar parts of trees and bushes provokes skin disorders like ulcers, inflammations, and itch, as well as fever and gastrointestinal and urinary affections. Likewise, in *De diff. febr.* 9 (VII 312.1-5 K) the physician of Pergamum mentions the lack of food (ἔνδεια τροφῆς) as one of the causes of daily fevers, along with other factors such as excessive heat and insomnia, and in *De marc.* 1 (VII 667.16-8 K) he states that the so-called μαρασμός, a condition defined as 'deterioration of the living body by dryness' (φοβρά ζῶντος σώματος ἐπὶ ξηρότητι, *ibid.* 666.1-2 K), arises in situations of starvation (ἀσιτία).

The cost of remedies and pharmaceutical preparations was likely too high for poor people. Although our knowledge of the economic value of remedies still remains limited,¹⁸ significant insights are provided by a papyrus of the 5th century CE. This papyrus fragment from Oxyrhynchus contains a medical prescription for a *malagma*, a kind of emollient or plaster, listing the ingredients accompanied by

¹⁶ Cf. e.g., Hes. *Op.* 686 χρήματα γὰρ ψυχὴ πέλεται δειλοῖσι βροτοῖσιν; Ar. *An.* 605 ἄνθρωπός γε κακῶς πράττων ἀτεχνῶς οὐδείς ὑγιαίνει; Soph. fr. dub. 1137 R πενία δὲ τοῖς ἔχουσιν οὐ μικρὰ νόσος; Eur. *El.* 375-376 ἀλλ' ἔχει νόσον / πενία and 427-429 σκοπῶ τὰ χρήμαθ' ὥς ἔχει μέγα σθένος / ξένοις τε δοῦναι σώμα τ' ἐς νόσους πεσόν / δαπάναισι σώσαι.

¹⁷ On the topic, see Harris 2016b:51 with n. 262.

¹⁸ A comparison may be drawn with the prices of unguents and *aromata* since they were often used as ingredients to prepare the therapeutic products. Cf. Drexhage 1991:389-393.

their quantity and some of the prices expressed in *denarii*. The text is as follows (*PSI Congr.* XVII 19 = *PSI inv.* 1634v [MP3 2419.1, LDAB 5959, TM 64725]):

μάλαγμα τ ... ν ()
 καστορίου ο(ὐ)γ(κίας) δ' (δηνάρια) λς
 ὀποπάνακος ο(ὐ)γ(κίας) δ' (δηνάρια) ν
 ἀδάρκης ο(ὐ)γ(κίας) δ'
 5 ἀσφαλτον ο(ὐ)γ(κίας) δ'
 χαλβάνης ο(ὐ)γ(κίας) δ' (δηνάρια) μς
 σαντυκίου ο(ὐ)γ(κίας) δ'
 πεπέρεως λί(τρα) α (δηνάρια) ν
 κολοφωνίας λί(τρα) α (δηνάρια) ν

5. 1. ἀσφάλτου 7. 1. σανδυκίου 8. 1. πεπέρεως 9. 1. κολοφωνίας

Recipe for a *malagma*. Of castor (secretion found in the body of the beaver) ¼ of an ounce, for the cost of 36 *denarii*; of gum of *Opopanax hispidus* ¼ of an ounce, for the cost of 50 *denarii*; of *adarce* (salt efflorescence on the herbage of marshes) ¼ of an ounce; of bitumen ¼ of an ounce; of resinous juice of all-heal ¼ of an ounce, for the cost of 46 *denarii*; of *sandykion* (bright red drug obtained by the oxidation of lead) ¼ of an ounce; of pepper 1 *libra*, for the cost of 50 *denarii*; of Colophonian resin 1 *libra*, for the cost of 50 *denarii*.

Besides seeking amateur advice from family members and friends or relying on self-treatment,¹⁹ one of the alternatives for the sick poor was to be healed by poor, imperfectly educated healers rather than professional ‘doctors’.²⁰ Once again the testimony of Galen deserves special mention since he explicitly attests to the existence of *πένητες* *ιατροί* who were used to heal poor people with poor remedies.²¹ The author also remembers doctors performing their healing activities *ἐν ἀγροῖς τε καὶ κώμαις*,²² probably using simple remedies obtained from local ingredients. In this case, there is no explicit connection between poverty and

¹⁹ Cf. Harris 2016b:36 and 43; Gourevitch 2016:262.

²⁰ See Neri 2006:93-94.

²¹ Cf. Gal. *De comp. med. sec. loc.* III 2 (XII 908.9-910.3 K) especially where the author states *γινώσκω γάρ ἤδη πού καὶ αὐτὸς οὐ μόνον ἱατροὺς πένητας ὄντας πολλοὺς, ἀλλὰ καὶ τοὺς ὑπ’ αὐτῶν θεραπευομένους, οἷς ἀγαπητόν ἐστιν, ἐπειδὴν νοσῶσιν, χόνδρον ἅμα μελικράτω προσενέγκασθαι καὶ καθαρὸν ἄρτον ἔχειν ἢ τι τῶν εἰς κατάπλασμα χρησίμων ἀλεύρων* (*ibid.* 909.11-16 K). Cf. also *ibid.* III 3 (XII 916.18 and 918.4 K).

²² Cf. Gal. *De simpl. med. temp. ac fac.* X 22 (XII 299.5-6 K) *ιατρός τις τῶν ἐν ἀγροῖς τε καὶ κώμαις ἱατρευόντων*.

healing practices, but it is likely that, given the type of cures and the rural context,²³ the patients were poor people living in the countryside.

Another alternative for the poor was to make use of a set of very practical and popular medical practices consisting of local herbal remedies empirically prepared, with just a bare minimum of theoretical basis. A further alternative was to rely on the medico-magical tradition, with techniques derived from both folk medicine and magic and characterized by a combination of charms, incantations and herbal preparations. Magicians could offer hope to the sick poor through amulets and the so-called ἐπωδαί, the ‘magical spells’.²⁴ A passage from Plato’s *Charmides* (155e) is illuminating on the supposed healing power of the ἐπωδαί:

αὐτὸς (*scil.* Χαρμίδης) γάρ μοι ἐδόκουν ὑπὸ τοῦ τοιούτου θρέμματος ἐαλωκέναί. ὅμως δὲ αὐτοῦ ἐρωτήσαντος εἰ ἐπισταίμην τὸ τῆς κεφαλῆς φάρμακον, μόγις πως ἀπεκρινάμην ὅτι ἐπισταίμην. τί οὖν, ἦ δ' ὅς, ἐστίν; καὶ ἐγὼ εἶπον ὅτι αὐτὸ μὲν εἴη φύλλον τι, ἐπωδὴ δὲ τις ἐπὶ τῷ φαρμάκῳ εἴη, ἣν εἰ μὲν τις ἐπάδοι ἅμα καὶ χρῶτο αὐτῷ, παντάπασιν ὑγιᾶ ποιοῖ τὸ φάρμακον· ἄνευ δὲ τῆς ἐπωδῆς οὐδὲν ὄφελος εἴη τοῦ φύλλου.

However, when he (*scil.* Charmides) had asked me if I knew the cure for headache, I somehow contrived to answer that I knew. ‘Then what is it?’ he asked. So I told him that the thing itself was a certain leaf, but there was a charm to go with the remedy; and if one uttered the charm at the moment of its application, the remedy made one perfectly well; but without the charm there was no efficacy in the leaf (trans. Lamb 1979:17).

A brief note on papyrus dating back to the 3rd century CE, *POxy* XLII 3068, explicitly attests to the medical use of amulets in Greco-Roman Egypt, where they represented a longstanding tradition in both Egyptian and Greek context. The anonymous writer of this note is interested in an amulet against tonsillitis. The note instructs its recipient to copy out the magical formula on a slip of papyrus (πιττάκιον) to be inscribed on a gold plate, then to send it to a certain Sarmates:²⁵

²³ On the relationship between Galen and popular medicine especially in the countryside, see Gourevitch 2016:251-271. See also Harris 2016b:36-39.

²⁴ Cf. Andorlini & Marcone 2004:10-11. On magic and medical science in the ancient world, see e.g., Ghalioungui 1963; Lanata 1967; Martini 1977; Luck 1985; Faraone & Obbink 1991; Gelmetti 2000; Andorlini 2016:171-172.

²⁵ See the interpretation offered by Youtie 1975b:280-281, reprinted in Youtie 1981b:265-268.

τὸ πρὸς παρίσθημα περίαμμα
 εἰς τὸ χρυσοῦν πέταλον τῷ Σαρμάτῃ
 πέμψον γραμμῶν εἰς πιττάκιον
 4 ὡς περιέχει.

3. 1. γράψας

The amulet against tonsillitis, for the gold plate, send it to Sarmates, having copied it on a slip of papyrus word by word (trans. Andorlini 2016:171).

These pagan practices can be compared to the healing miracles effected with the aid of relics of saints in a Christian milieu. For pagans and Christians alike, the ability to heal was seen as a manifestation in action of a divine or supernatural power.²⁶ Like the pagans with magic, the Christians could invoke the mercy of God to cope with the diseases. A remarkable example of this practice is provided by a papyrus from Oxyrhynchus assigned to the 5th or 6th century CE (*POxy* XI 1384 [MP3 2410, LDAB 3237, TM 62077]).²⁷ The text, a sort of therapeutic miscellany, is written *per fibras* on the *recto* of a papyrus sheet (30.2 x 15.4 cm) and is articulated into five textual sections separated by *paragraphoi* and introduced by staurograms with a curl descending from the right end of the crossbar: a convention quite common to texts including biblical and liturgical passages. The beginning and the end consist of medical recipes: the first recipe lists many ingredients for a purgative, among which cumin, fennel, parsley, salt and vinegar (lines 1-14); the last two sections contain a prescription for a medical drink to heal strangury (lines 30-33), prepared with dry seeds of wild basil crumbled with wine of Ascalon, and another one for a poultice to treat wounds made with the boiled fruit of a cypress (lines 34-36). The middle portion records two quite different theological extracts. The first (lines 15-22) represents Jesus meeting some persons in the desert, who ask Him how to relieve the sick, and is apparently derived from an uncanonical gospel; the latter (lines 23-29) concerns the ‘angels of the Lord’ seeking a remedy for the eyes from Jehovah Sabaoth and seems to have been taken from a Jewish, rather than Christian work of an apocalyptic nature.²⁸

²⁶ Cf. Nutton 2004:312-313.

²⁷ Cf. Mazza 2007:438-443 and De Bruyn 2017:78-80 with a detailed bibliography. Image at <http://special.lib.gla.ac.uk/teach/papyrus/oxyrhynchus1384.html> (Glasgow University Library, Special Collections)

²⁸ Cf. e.g., the *Apocalypsis Baruchi* contained in *POxy* III 403 of the 4th or 5th century CE (LDAB 3471, TM 62308) and the *Ascensio Isaiae* preserved by *PAmh* I 1 of the 5th century CE (LDAB 5989, TM 64754).

- 15 ἥ ἀπήντησαν ἡμ[ῖν τινας] [ἄνδ]ρες
 ἐν τῇ ἐρήμῳ κα[ὶ εἶπαν τῷ κ(υρί)ῳ,
 Ἰησοῦ, τί<ς> ἐνη θαραπία ἀρρώ[στοις;
 καὶ λέγ<ε>ι αὐτοῖς, ἔλεομ ἀπέδ[ωκα] [ἐ-
 λίας καὶ σβύρν[α]ν ἐξέχ[υσα τοῖς
 20 πεποιθόσι τ[ῷ] ὀνόματι τοῦ
 πατρὸς καὶ ἀγ[ί]ου [πν(εύματο)ς καὶ τοῦ
 υἱοῦ].
-
- 25 ἡ ἄγγελοι κ(υρί)ῳ ἀνῆρθαν πρὸς μ[έσον
 τὸν οὐρανὸν ὀφθαλμοῦς
 πονο<ῦ>ντες καὶ σφόγγον κρα-
 τοῦντες. λέγει αὐ[τοῖς] ὁ κ(υρί)ῳ τί ἀνῆρ-
 θατε, ἀγνοῖ πανκάθαροι; ἴασιν λαβ<ε>ῖν
 ἀνήλθαμεν, Ἰαῶ Σαβαώθ, ὅτι σοὶ
 δοινατὸς καὶ \οί/σχιρός.
-

17.1. ἐνι θαραπεία 18-9.1. ἔλαιον and ἐλ|αίας 19.1. σμύρναν 23.1. ἀνῆλθαν
 25.1. σπόγγον 26-7.1. κ(ύριο)ς, τί ἀνήλ|θατε 28-9.1. σὺ | δυνατὸς καὶ ἰσχυρός

... men met us in the desert and asked the Lord, ‘Jesus, what treatment is possible for the sick?’ And He answered them, ‘I gave olive oil and poured out myrrh for those who believe in the name of the Father, the Holy Spirit, and the Son’.

The angels of the Lord ascended to mid-heaven, suffering from eye ailments and holding a sponge. The Lord says to them, ‘Why have you ascended, O holy, all-pure ones?’ (And they replied), ‘We have come up to receive a remedy, O Jehovah Sabaoth, because you are mighty and powerful’.

According to the *editores principes*, Grenfell & Hunt, these healing legends or *historiolae* ‘have evidently been inserted on account of their medical interest, perhaps as a kind of charm’ (238). It is likely that the scribe included these narratives considering them as effective remedies capable to enhance the therapeutic properties of the recipes. So, the link connecting the two excerpts with the medical prescriptions is probably ‘the implied virtue of an appeal by name in the one case to the Trinity, and in the other to Jehovah Sabaoth, who is often invoked in Gnostic prayers’, rather than the simple ‘mention of the olive oil and myrrh as relieving sickness, and the sponge as relieving the eyes’ (*ed. pr.*, 239).

When Christians became sick, they were used to make the sign of the cross or resort to blessed oil or water, but they also utilized amulets, often written with an incantation, although church authorities disapproved this kind of ‘devilish’

remedies. Several examples of Christian amulets on papyrus have survived from Late Antique Egypt.²⁹ As it has been pointed out by De Bruyn (2017:3):

By the fourth century CE, when incantations and amulets with Christian elements begin to appear in the material record, a large, eclectic, and syncretistic body of Greco-Roman recipes for various procedures and purposes was in circulation, as well as incantations and objects that were actually prepared for or used by individuals (applied materials). These materials form the backdrop to what follows from the fourth to the eighth centuries ... It allows us to observe how amulets with Christian elements preserve customary Greco-Egyptian forms of invocation and adjuration, juxtapose these forms with Christian ones, modulate them into Christian ones, or replace them entirely with Christian texts that are nevertheless similar in function.

To mention just some typologies of amulets incorporating Christian elements, sometimes a customary incantation can be framed with Christian symbols, particularly the sign of the cross, but even with something much more elaborate, e.g., a liturgical formula. An outstanding *specimen* is represented by *POslo* I 5 (LDAB 5822, TM 64592),³⁰ an amulet of the 4th-5th century CE using magical words and symbols to invoke various powers, among which Christ the Lord, to protect a house with all its inhabitants from scorpions and snakes, every evil and demon. The incantation is closed by a Christian doxology followed by some Christian markers, such as the sequence *alpha*, cross, *omega* and the acronym/acrostic ιχθϋς. Other times, Christian and customary terms are paired, such as in an amulet of the late 4th-early 5th century CE preserved by *PKöln* VI 257 (MP3 6038, LDAB 5801, TM 64571).³¹ The text begins with an invocation to the Trinity (lines 1-2 εἰς πατήρ, εἰς υἱός, ἐν | πνεῦμα ἅγιον, ἀμήν) followed by the powerful palindrome name ἀβλαναθαναβλα, that is incorrectly written ἀβλαναθαναβλα, in form of a V-shaped *Schwindeschema* ('fading scheme'). Then, it appeals to 'holy signs' to heal a certain Tiron from fever (ἅγιε | χαρακ|τῆρες | θεραπεύ|σατε | Τείρονα | ὃν ἔτε|κεν | Παλλαδία | ἀπὸ παντὸς ῥίγους).

Significantly indicative of the connection between poverty and illness is the cult of holy healers that developed during the first centuries of Christianity. Several

²⁹ For a comprehensive investigation of magical practices in Christian time as well as for an analysis of papyrus amulets incorporating Christian elements, see De Bruyn 2017. Cf. also Parsons 2007:180; Nongbri 2010:59-68 with bibliography; De Bruyn & Dijkstra 2011:163-216 and the address <http://asorblog.org/2017/10/03/making-amulets-christian-artefact-scribes-contexts/>.

³⁰ Description and image at <http://ub-fmserver.uio.no/viewRecord.php?recid=44>.

³¹ Description and image at <https://papyri.uni-koeln.de/stueck/tm64571>.

Christian physicians became canonized saints of healing and were named *ἀνάργυροι*, literally ‘without silver’, ‘unmercenary’ because they did not charge monetary compensation for their services. Since they assisted for free those in need, they were celebrated as ‘saints of the poor’, who put into practice the evangelical words (*Matt.* 10.8) *ἄσθενοῦντας θεραπεύετε [...] δωρεὰν ἐλάβετε, δωρεὰν δότε* (‘heal the ill [...] freely you have received, freely give’). The most famous *ἀνάργυροι* in both East and West were Cosmas and Damian, Arabian twin brothers martyred in Syria during the persecution of Diocletian: they were so celebrated for their skills in medical science that became the patron saints of pharmacy and medicine after their canonization.

The cult of another renowned couple of ‘Unmercenary’, Saints Cyrus and John, has its origin in the Egyptian context. They suffered martyrdom during the persecution of Diocletian, at the beginning of the 4th century CE, and their miracles were narrated by Sophronius of Jerusalem (*PG* LXXXVII 3423-3676 Migne). Their cult was established by St. Cyril, Patriarch of Alexandria (412-444), in a shrine at Menuthis, situated northeast of Alexandria: Cyrus was a physician and John a soldier and, after their martyrdom, they acquired a strong reputation for miraculous healing both bodily and spiritual.³²

Extremely interesting is the cult of the Egyptian patron saint and martyr Colluthus in Antinoe, in the Middle Egypt.³³ Colluthus, tortured and killed, like Cyrus and John, during the persecution of Diocletian, was a healer renowned as *archiatros* specialized in the cure of eye diseases. The excavations that the Papyrological Institute ‘Girolamo Vitelli’ of Florence has conducted in Antinoe since 1935-1936 until today have brought to light a conspicuous group of Coptic oracle tickets on papyrus in the place of Colluthus’ shrine recovered in the northern necropolis. Many of these oracular questions, thrown away just after opening or even still unrolled, concern health issues. Devotees addressed them to ‘the God of Saint Colluthus’ and used to present their queries in form of alternatives, one phrased positively, the other negatively, inscribed upon two individual slips of papyrus to be brought out by the priest of the saint. The ticket returned followed this formulaic pattern: ‘God of Saint Colluthus, if it is your will that [something takes place], return this ticket to me’.³⁴ Together with these papyri, several *ex-voto* plates destined to acknowledge Colluthus’s *miracula* were found. They depict the part of the body — breasts, feet, but especially eyes — hit by the disease, then

³² Cf. Lascaratos 1992:145-152; Nutton 2004:311; Montserrat 1998:257-279 and 2005:230-242; Holman 2008:118; Booth 2014:45-49.

³³ Cf. Crum 1929:323-327; Donadoni 1954:183-186; Frey 1979:35-70; Papini 1985:245-255 and 1998:393-401; Papaconstantinou 1994:282-284; Andorlini & Marcone 2004:96 and 2006:29-30; Frankfurter 2005:245-246.

³⁴ Cf. Donadoni 1964:286-289; Frankfurter 1998:3-48; Zanetti 2004:43-109.

healed. These discoveries represent the archaeological proof of the miraculous healing activity attributed to the saint.³⁵

To sum up, the centuries of Late Antique Christianity see the coexistence of three complementary systems of healing:³⁶ a system of religious and ‘supernatural’ medicine manifesting by way of divine power and miracles; the persistence of a system, inherited by the pagan cults, linked to the magical praxis of healing through amulets, spells and charms; and finally the acceptance of a ‘rational’ or ‘rationalistic’ medicine (see *infra*).

Poverty, medicine and health care in the Christian world: An overview through sources and terminology

The affirmation of Christianity entailed greater awareness of and sympathy for the themes of poverty and sickness and, ‘in general, Christians took a benign attitude to medicine’,³⁷ displaying a renewed social and philanthropic sensitivity, mainly from the 4th century onwards. This is evident, for instance, from the many pages and texts that the Church Fathers devoted to the topic, such as the *oratio secunda* of the work by Gregory of Nyssa entitled *De pauperibus amandis*, περὶ φιλοπρωχίας, — (PG XLVI 471-490 Migne). Here, the lepers are regarded as the poor *par excellence* and the devastating physical and social effects of the leprosy are vividly sketched in their intensity and horror.³⁸ The Church Fathers and other Christian theologians tended to consider healing as a comprehensive concept: illness was conceived as a problem of the total human being and the healing through Christ included both body and soul.³⁹

According to a conception already present in Greco-Roman Antiquity and the Jewish world, also from a Christian perspective there is often a causative link between sin and illness: illness is seen as a consequence of sin and is associated with the punishment and wrath of God.⁴⁰ The pagan concept of attributing plagues to acts of impiety goes back to Homer. The *Iliad* contains the earliest literary documentation of an epidemic disease. When Agamemnon refuses to return

³⁵ Cf. Andorini 2016:170-171. For images of some *ex votos* see Pintaudi 2008:27 nos. 64 and 65, as well as Andorini & Marcone 2006 Pl. 2.

³⁶ Cf. Dal Covolo 2007:31-40.

³⁷ Nutton 2004:309. On illness, medicine and health care in early Christianity, see especially Dörnemann 2003; Ferngren 2009; Ihssen 2018:71-83.

³⁸ On the theme of poverty and illness in Patristic texts, see D’Ippolito 2006:49-66 with bibliography.

³⁹ Cf. Dal Covolo 2007:31-33.

⁴⁰ Cf. in particular Humbert 1964:1-4, 18 and 15-16; Louw 1994:28-34; Mazzini 1998:160; De Salvo 2006:39; D’Ippolito 2006:50-52; Soraci 2006:301 with bibliography on the topic in n. 3; Harris 2016b:61.

Chryseis to her father Chryses, priest of Apollo, the god brings a plague on the Achaean camp: the cause of the pestilence is Agamemnon's refusal that in this context represents the 'sin' (1.9-12):

ὁ γὰρ βασιλῆϊ χολωθεὶς
νοῦσον ἀνὰ στρατὸν ὄρσε κακὴν, ὀλέκοντο δὲ λαοί,
οὔνεκα τὸν Χρῦσιν ἠτίμασεν ἀρητῆρα
Ἀτρεΐδης

For he in anger against the king roused throughout the host an evil pestilence, and the people began to perish because upon the priest Chryses the son of Atreus had wrought dishonor.

The Christians find in the *Old Testament* the earliest attestations of illness like a phenomenon of God's punishment for sin, as it is clearly expressed e.g., in *Ps.* 38.3 'because of your wrath, my whole body is sick; my health is broken because of my sins'.⁴¹ In the *New Testament* this connection reaches a phase of ambiguity: the position of Jesus seems to be one step further since the focus is on illness as Jesus' opportunity to reveal his close relationship with the Lord rather than on the cause of the sickness. For example, in *Jo.* 5.15 the link sin-illness emerges explicitly when Jesus, after healing a man that had been invalid for a long time, says to him 'see, you are well again. Stop sinning or something worse may happen to you' (ἴδε ὑγιὴς γέγονας· μηκέτι ἁμάρτανε, ἵνα μὴ χειρόν σοί τι γένηται). On the other hand, in *Jo.* 9.1,1-5,2 — the episode of the healing of the man born blind — the blindness is not a punishment for sin, but a way to manifest God through that disease.⁴²

⁴¹ Cf. also *Es.* 9.8-12 and 12.29-30; 2 *Sm.* 24. On the biblical notion of illness, see Allan 2001 and Avalos 1995:284-299, as well as Avalos, Melcher & Schipper 2007 for illness (and disability in particular) as a divine punishment.

⁴² In other words, the common concepts in the *Gospels* are: 1) along the veterotestamentarian line, sickness and diseases are a method of God's punishment for sin (see *Jo.* 5.15 aforementioned); 2) other times, illness is Jesus' opportunity to reveal his relationship with the Lord: he miraculously heals sickness to demonstrate he is the son of God, cf. e.g., *Matt.* 4.23-24 καὶ περιῆγεν ἐν ὅλῃ τῇ Γαλιλαίᾳ [...] θεραπεύων πᾶσαν νόσον καὶ πᾶσαν μαλακίαν ἐν τῷ λαῷ. καὶ ἀπῆλθεν ἡ ἀκοὴ αὐτοῦ εἰς ὅλην τὴν Συρίαν καὶ προσήνεγκαν αὐτῷ πάντας τοὺς κακῶς ἔχοντας ποικίλαις νόσοις καὶ βασάνοις συνεχομένους καὶ δαιμονιζομένους καὶ σεληνιαζομένους καὶ παραλυτικούς, καὶ ἐθεράπευσεν αὐτούς ('Jesus went through Galilee [...] healing every disease and sickness among the people. News about him spread all over Syria, and people brought to him all who were ill with various diseases, those suffering severe pain, the demon-possessed, those having seizures, and the paralyzed; and he healed them'). The most substantial public miracle in this sense is when Jesus raised Lazarus from the dead after an illness killed him. This represented such a powerful testimony for Jesus that the Jews

καὶ παράγων εἶδεν ἄνθρωπον τυφλὸν ἐκ γενετῆς. καὶ ἠρώτησαν αὐτὸν οἱ μαθηταὶ αὐτοῦ λέγοντες, Ῥαββί, τίς ἡμαρτεν, οὗτος ἢ οἱ γονεῖς αὐτοῦ, ἵνα τυφλὸς γεννηθῇ; ἀπεκρίθη Ἰησοῦς, Οὔτε οὗτος ἡμαρτεν οὔτε οἱ γονεῖς αὐτοῦ, ἀλλ' ἵνα φανερωθῇ τὰ ἔργα τοῦ Θεοῦ ἐν αὐτῷ. ἡμᾶς δεῖ ἐργάζεσθαι τὰ ἔργα τοῦ πέμψαντός με ἕως ἡμέρας ἐστίν· ἔρχεται νύξ ὅτε οὐδεὶς δύναται ἐργάζεσθαι. ὅταν ἐν τῷ κόσμῳ ᾧ, φῶς εἰμι τοῦ κόσμου.

As Jesus was passing by, he saw a man who had been blind from birth. ‘Rabbi’, his disciples asked him, ‘who committed that sin that caused him to be born blind, this man or his parents?’ Jesus answered, ‘Neither this man sinned nor his parents sinned, but [he was blind] so that the works of God should be manifested in him. We must work the works of the one who sent me while it is daytime. Night is coming when no one can work. As long as I am here in the world, I am the light of the world’.

Among the Christians of the early centuries, the connection between sin and illness in the general causative sense remains widespread mostly in the low and middle classes and is reflected in kinds of literature with popular intent like the hagiography.⁴³ But it tends to be rejected by the theologians and the Church Fathers since God — the supreme good — cannot cause the evil, hence the illness. The Cappadocian Father Basil of Caesarea even devotes an entire homily to the topic, the *Hom.* 9 ὅτι οὐκ ἐστὶν αἴτιος τῶν κακῶν ὁ Θεός, *Quod Deus non est auctor malorum* (PG XXXI 329-353 Migne).⁴⁴

On the other side, the Christian authors consider the recovery from illness as a sign of the mercy of God — so that mercy breaks the causative link between sin and illness. Thus, medicine is seen as the instrument given by God to humankind to heal disease, which goes some way to explain the general positive attitude of Christians — notably the majority of the Church Fathers — toward Greek ‘rational’ medicine.⁴⁵ But it must be stressed that, according to their

who had seen what he did started believing in him (*Jo.* 11.1-46). But in *Jo.* 9.1,1-5,2, as already said, God allows the blindness not as a punishment for sin but to reveal Himself through that disease. Here, the position of Jesus may result innovative in the first part of his answer (‘Neither has this man sinned nor his parents’), but the second part (‘but that the works of God should be manifested in him’) reconnects with the concept 2.

⁴³ However, hagiographical texts — notably the ones about medical saints — can display a certain level of ‘medicality’, especially in the diagnosis, descriptions and treatment of the conditions, cf. Konstantinidou & Perdiki 2020.

⁴⁴ Cf. D’Ippolito 2006:51-52.

⁴⁵ See e.g., what is said by Basil in the *Regulae fusius tractatae*, answering the *interrogatio* 55 εἰ τοῖς ἐκ τῆς ἱατρικῆς κεχρησθαι κατὰ σκοπὸν ἐστὶ τῆς εὐσεβείας (PG XXXI 1044B-1052C Migne). On how professional physicians are seen as instruments of God by a good part of the Church Fathers Amundsen 1982:327-342 is particularly relevant,

theological view, the effectiveness of the physicians' healing action is exclusively dependent on God, whereas God can heal independently of human physicians.⁴⁶ Therefore, the physician is considered as a sort of *imitator Christi* or *minister Dei*.⁴⁷

A concrete proof of the positive relationship between Christianity and medicine is a metrical inscription on a marble tombstone from Rome (Coem. Cyriacae ad S.Laurentium, via Tiburtina) dating back to the 5th century (ICUR NS VII 18661 [= CLE I 1414 = ILCV 1233]). It is a *titulus sepulchralis* in memory of the priest and *anargyros* doctor Dionysios. Verse 13 explicitly attests to the conciliation between the *ars medica* and the Christian faith: *ars veneranda fidem fidei decus extulit artem*, 'the art (of medicine) has to venerate the faith, and the honor of the faith glorifies the medical art'.

Moreover, the metaphor of Christ as a *medicus* or *archiater* is a common *topos* in Christian texts and scholars have repeatedly investigated its significance and frequency in the works of the Church Fathers,⁴⁸ such as Tertullian, the first Latin patristic author to use it, Origen, Cyprian, Jerome and, especially, Augustine, whose employment of the *Christus medicus* figure and other medical metaphors is

see especially: 'The fathers [...] regarded the created world as good insofar as it is the product of God's benevolent plan and His beneficent provision for man's sustenance. Medicine is part of that plan and provision, given by God to help to succor man's ills in this fallen world' (337). However, there are also cases — such as Tatian, Marcion and Macarius — of rejection or criticism of medicine, see *ibid.* 345-349. For the positive attitude toward Greek rational medicine not only in the Patristic, but also in the *New Testament*, see Amundsen & Ferngren 1996:2955.

⁴⁶ Cf. Amundsen 1982:341: 'What, then, is the essence of the attitudes of these fathers to the use of medicine? Medicines and the skill of physicians are blessings from God. It is not *eo ipso* wrong for a Christian to employ them, but it is sinful to put one's faith in them entirely since, when they are effective, it is only because their efficacy comes from God who can heal without them. Thus to resort to physicians without first placing one's trust in God is both foolish and sinful. Likewise to reject medicine and the medical art entirely is not only not recommended but is disparaged'.

⁴⁷ See e.g., Origen's word in the *Adnotationes in librum III Regum* (PG XVII 53C-56A Migne) οἱ γὰρ εὐσεβεῖα κοσμοῦμενοι κέχρηται μὲν τοῖς ἰατροῖς ὡς ὑπουργοῖς τοῦ Θεοῦ, εἰδότες ὅτι καὶ τὴν ἱατρικὴν αὐτὸς ἔδωκε τοῖς ἀνθρώποις, ὥσπερ δὴ καὶ τὰς ἄλλας τέχνας, καὶ τὰς βοτάνας αὐτὸς ἐκ τῆς γῆς βλαστῆσαι προσέταξεν. ἴσασι δὲ ὅμως, ὡς οὐδὲν ἰσχύει τῶν ἱατρῶν ἡ τέχνη, μὴ βουλομένου Θεοῦ· ἀλλὰ τοσαῦτα δύναται, ὅσα αὐτὸς βούλεται.

⁴⁸ Among the copious bibliography on the theme, see Pease 1914:74-77; Arbesmann 1954:1-28; Eijkenboom 1960; Schipperges 1965:12-20; Dumeige 1972:115-141; Sauser 1992:101-123; Andorlini & Marcone 2004:158-159; De Salvo 2006:39-40; Ferngren 2009:28-30; Weber 2013:125-142. Further bibliography in Schulze 2005:15-16 n. 3.

far more extensive than in any other patristic writer.⁴⁹ The relevance of this theme clearly emerges, for example, in Jerome's incisive definitions of Christ as the *verus* or *solus medicus*, *verus archiater*, *ipse et medicus et medicamentum*, *quasi spiritualis Hippocrates*:⁵⁰ Christ is the Divine Healer of the spiritually sick mankind and applies remedies or extirpates sin from the soul exactly like a human practitioner does with cautery and knife. To quote Nutton (2004:313-314), 'the agonies of temptation, such as those of disease, can be removed only if one comes to the "surgery" of Christ, whose healing is both assured and free'. Interestingly, an inscription provides concrete evidence of this theme so recurrent in literature. It is an extremely rare case of a Christian inscription containing an invocation to Christ as *medicus*. This 4th century inscription on stone was uncovered in 1919 by Paul Monceaux during excavations at Timgad, the Roman city of Thamugadi (Algeria), and was completed by a second fragment found in 1923.⁵¹ Lines 5-13 read: *rogo te*, | *Domine*, | *su(b)veni*, | *C<h>riste*, *tu* | *solus me|dicus*, *sa|nctis et* | *peniten|tibus* ('I beg you, Lord, come, Christ, you who only are the physician, to the aid of the saints and penitents').

In such a socio-cultural context, the Christian Church has played a pivotal role in the creation of a network of caregiving to poor patients, in terms of an organized system of support to assist the sick and needy, especially from the 4th century CE. This also means the definitive acceptance of a rational approach to healing. To address the issues of poverty and illness, a closer connection between the history of medicine and the history of Christian charity can be traced at that time. Many diseases were related to poverty or due to poor living conditions and the developing Christian health care system was particularly attentive to the lower socio-economical strata. This Christian duty of care for the infirm and poor was, then, concretely translated in the erection of 'hospitals' and institutions where people could receive medical assistance: they represent in all respects 'the necessary union of rational medicine with the distinctly Christian value of charity'.⁵² Historically speaking, the modern hospital system owes its origins to that

⁴⁹ For an understanding of the *Christus medicus* concept in Augustine and his use of medical imagery, see Arbesmann 1954:1-28 just mentioned and Reid 2008.

⁵⁰ References to the passages in Pease 1914:74-75. See also Amundsen 1982:331.

⁵¹ See the *editio princeps* of the two fragments respectively in Monceaux 1920:75-83 and 1924:78-81 (here, 80 the transcription of the whole inscription). See also Carcopino 1928:79-87. There seems to exist only another epigraphical *specimen* of invocation to *Christus medicus*: a Greek exemplar from Frīkyā, in Syria, in which Christ is named *ἰατρὸς καὶ λύσις κακῶν*, cf. Dölger 1910:253 no. 25.

⁵² Van Minnen 1995:167.

kind of charitable and treatment facilities and has been considered as one of the founding elements of modern medicine.⁵³

It must, however, be remembered that institutions involved in the provision of medical care are evidenced long before the rise of Christianity and were usually connected to the sanctuaries and temples.⁵⁴ The earliest documented ones were in ancient Egypt, while in ancient Greece the Ἀσκληπιεῖα, the healing temples sacred to the healer-god Asclepius, were centres devoted to healing purposes. Differently, in ancient Rome medical services were provided in the *valetudinaria* ('infirmaries'): spaces expressly designed for valetudinarians, people — physically and etymologically — deficient in *valetudo*, 'good health'. Their construction dates back to the age of Augustus and they were originally intended for the care of the injured and sick soldiers. The vast majority of archaeological evidence for military *valetudinaria* is found in Roman colonies in northern Europe. Examples are the remains connected to the Roman legionary fortresses of Neuss, Inchtuthill, *Novae*, *Castra Vetera*, Caerleon, *Carnutum*. However, Greek papyri demonstrate that military *valetudinaria* were present also in Roman Egypt.⁵⁵ The excavation data prove that *valetudinaria* were an important part of almost every military camp along the border of the Roman Empire.⁵⁶ Similar infirmaries were then established also in Italy for other specialized classes of people, such as the slaves and the gladiators. But it was only with the official conversion of the empire under Constantine that the Christian message led to an expansion of health care and to establish centers for medical interventions in the architectural form of the hospitals: the greatest medical achievement of Late Antiquity.

The establishment of hospitals, whose model seems to have been provided by the innovative healing practices reached in the earliest monasteries,⁵⁷ became a

⁵³ Some valuable contributions on hospitals and health care in Antiquity and Late Antiquity and the problems concerned with their origins and developments, are: Amundsen & Ferngren 1982:1-32; Miller 1984:53-63; Mattioli 1998:245-278; Risse 1999:69-116; Remie Constable 2003:35-37; Nutton 2004:314-315; Andorlini & Marcone 2004:160 and 2006:15-35; Crislip 2005; Horden 2005:361-389; D'Ippolito 2006:62-63; Zecchini 2006:545-546 and 550; Dal Covolo 2007:31-40; Riva & Cesana 2013:1-4; Ihssen 2016:84-87.

⁵⁴ On the birth, growing and evolution of hospitals from temples and sanctuaries, see De la Garza Villaseñor 2000:8997 with bibliography. For the history of pre-Christian healing places, see Risse 1999:16-68 and Crislip 2005:25-127.

⁵⁵ See, in particular, the attestation of an ὑγιαστήριον in *BGU* VII 1564,7 (138 CE, Philadelpia) containing an order of white blankets for the military hospital of the Emperor's camp (see comm. *ad l.*), and the mention of a *valetudinarium* in *PSI* XIII 1307 (I CE, Alexandria?).

⁵⁶ For descriptions and discussions of military *valetudinaria*, see Byrne 1910:270-271; Korpela 1987:179 and 182-182; Jackson 1988:134-136; Krug 1993:204-208.

⁵⁷ Crislip 2005 is illuminating on the topic.

sort of vocation for the ecclesiastical leaders of the Greek-speaking eastern Mediterranean world. Charitable institutions were mostly administrated by bishops, but they could also be founded and funded by private individuals: wealthy philanthropists who economically supported the charities through their donations.⁵⁸ Conventionally, the first hospital to be founded was the so-called *Basileias*⁵⁹ erected by Saint Basil on the outskirts of Caesarea in Cappadocia (Turkey) shortly after being elected bishop of the city in 370 CE. The complex of the *Basileias* was so extensive and monumental that it was lauded by Gregory of Nazianzus as a *καινή πόλις*, ‘a new city’ (*Or.* XLIII 63, 1.3 [*PG* XXXVI 577C Migne]). It included elaborate ‘hospital facilities for the sick, a hospice for lepers, a poorhouse for the indigent and elderly, a hostel for travellers and the homeless’,⁶⁰ as well as housing for doctors and nurses, accommodation for visitors to the hospital, and a monastery. Even though the *Basileias* offered a wide range of hospitable services, it was so emblematic of the association poverty-illness that it was usually designated as a *πτωχοτροφεῖον*, a ‘poorhouse’. By the end of the 4th century, institutions with similar purposes sprouted up in Constantinople. Several of them were founded, for examples, by John Chrysostom. Within a century, they became a common element in the landscape of Late Antiquity. In the meantime, such buildings were erected also in Rome and the Latin West. The first public hospital in Rome was founded around 397 CE by Fabiola, a Christian Roman lady of noble birth and friend of Saint Jerome.⁶¹

In Greek written sources, a variety of names — some very common, others very rare — are used to describe this kind of institutions. They are mainly compound words with the first member defining the type of sick or needy to whom the building was destined and the second member derived from the verbs *κομέω* (‘take care’), *δέχομαι* (‘to take, receive’) or *τρέφω* (‘to nourish’). Among these designations: *νοσοκομεῖον*, ‘infirmary, hospital’ (*νόσος*, ‘disease’ + *κομέω*), *ξενοδοχεῖον*, ‘place for lodging strangers’ (*ξενός*, ‘guest, stranger’ + *δέχομαι*) and

⁵⁸ Cf. Serfass 2008: 97.

⁵⁹ See especially Crislip 2005:104 and 107-108; Ferngren 2009:124-129; Heyne 2015 for a reconstruction of the *Basileias* and references to primary sources. At the same time, for example, also Eustathius of Sebastia built a *πτωχοτροφεῖον* where the sick people could receive medical assistance, see Nutton 2004:314 and n. 110.

⁶⁰ Crislip 2005:104.

⁶¹ Cf. Hier. *Ep.* 77.6 *et primo omnium νοσοκομεῖν instituit, in quo aegrotantes colligeret de plateis et consumpta languoribus atque inedia miserorum membra refoveret*. Another friend of Jerome, Pammachius, founded a similar institution in Ostia a few years later, while Saint Augustine, early in the 5th century, records the construction of an analogous building in Hippo (*Aug. Sermon.* 356.10). On the topic, see for example Nutton 2004:314-315; Andorlini & Marcone 2004:160 and 2006:19-20; Crislip 2005:103; Picardi 2011:329-335; Lasheras González 2017:25 with further bibliography.

ξεν(ε)ών, ‘gest-chamber, hostel’ / ‘hospital’, γερωντοκομεῖον / γηροκομεῖον, ‘old age home’ (γέρων, ‘old’ + κομέω), βρεφοτροφεῖον / ὀρφανοτροφεῖον, ‘refuge for children, orphanage’ (βρέφος, ‘new-born babe’ / ὀρφανός, ‘orphan’ + τρέφω), κελεροκομεῖον, ‘hospice for lepers’ (κελερός, ‘leper’ + κομέω), λοχοκομεῖον, ‘care home for women who have just given birth’ (λοχός < λεχώ, ‘woman who has just given birth’ + κομέω). It is also attested the Greek borrowing ὁσπίτιον from Latin *hospitium*, ‘reception facility’ or ‘care home’. A certain flexibility occurs in the use of this terminology.⁶² It is not excluded that at least some of these institutions took care of several kinds of sick and needy without too much distinction.⁶³

The terms πτωχεῖον and πτωχοτροφεῖον, ‘place for the care of the destitute’, ‘poorhouse’ (< πτωχός, ‘beggar’), are particularly interesting for the purpose of this article since they highlight the contiguity between poverty and sickness. These ‘poorhouses’ represent a type of charitable institutions aimed at feeding, housing, as well as curing the destitute. It can be noteworthy to remember which kind of poverty is traditionally meant by the term for ‘poor’ originating these nouns. In the Greek vocabulary of poverty, the most common words for the poor are πένης and πτωχός. According to the traditional definition, the main social and semantic distinction between them is that πένης is applied to the ‘laboring poor’, that is the lower class, those who work for living and have at least an occupation, a home, a place within society, whereas πτωχός designates ‘the destitute beggar’, the absolute homeless who, being utterly and abjectly poverty-stricken, is placed outside the bounds of society and struggles to survive until the next day. However, it must be noted that these terms are not always sharply distinguished in the ancient texts: they present a certain range of semantic nuances and their use is quite flexible, being affected by factors like the historical period, the literary genre, and the specific context.⁶⁴

The evidence of the Greek and Coptic papyri represents a body of sources remarkably capable of shedding light on material and socio-cultural elements of the ancient world thanks to the close proximity of the papyri to everyday life. Thus, they provide concrete information on structures for medical care, philanthropic programs and charitable institutions in the cities and villages of the Egyptian

⁶² For discussions and references see in particular Andorlini & Marcone 2006:20-23 and 32. For ξενοδοχεῖον, ξεν(ε)ών and νοσοκομεῖον, cf. Bennett 2017 chapter 1. See also Van Minnen 1995:168.

⁶³ Cf. Wipszycka 1972:115 and 118.

⁶⁴ For definitions and discussions, cf. e.g., Holman 2001:5-6; Crislip 2005:107; Rathbone 2006:105; Buell 2008:41-42; Harris 2011:30-34. See also Osborne 2006:11-15 on the terminology and representation of poverty in the Greco-Roman world.

chora.⁶⁵ According to Serfass (2008:89-90), their testimony is valuable especially ‘because it counterbalances the tendency of Late Antique evidence for philanthropy’ — as well as for hospitals — ‘to focus on large cities such as Alexandria, Constantinople, Jerusalem, and Antioch’, revealing ‘that well-organized charitable outreach was also present in the Egyptian *chora*’, that is in smaller settlements of the countryside. This means that the papyrological evidence — as often happens — contributes significantly to integrate what is already known from other types of sources and, in dialogue with them, helps us to reach a broader view and a deeper understanding of the phenomena of the ancient world. The value of the papyrological references to structures for medical care and charities lies also in the fact that they are restricted to a limited time span — from about the middle of the 6th to the end of the 7th century —,⁶⁶ and come from a confined area, that is the Middle Egypt including the Hermopolites, Antinoites, Oxyrinchytes, Heracleopolites and Arsinoites *nomes*.⁶⁷ The conspicuous number of papyri mentioning these institutions or their employees attests to their diffusion and reveals how widespread they were.⁶⁸ The establishment of hospitals in the just mentioned time span does not seem to have been an predominant prerogative of the bishops, as it was in the 4th century and is well documented by literary sources for other areas of the eastern Christian empire (see *supra*). In fact, papyri from Egypt

⁶⁵ Cf. Wipszycka 1972:115-120; Husson 1974:169-177; Van Minnen 1995:153-169; Andorlini & Marcone 2006:23-31; Serfass 2008:88-102.

⁶⁶ The emergence of references to such institutions only so late seems to be consistent with the socio-economic situation of Egypt in Late Antiquity compared to the previous periods. An interesting study by Rathbone (2006:100-114) reveals ‘a relative absence of poverty in Roman Egypt’ (108): ‘It is a fact that poverty is barely heard of in the documents from Roman Egypt’ (105) and ‘the rarity of direct references in the Roman-period papyri to poverty, destitution or begging is striking’ (106). According to the author, ‘Christianization in the fourth century made poverty prominent [...]’. When papyrus documents re-emerge in the late fifth century after their curious near disappearance during the previous hundred years, they too attest regular support by church organizations for the poor [...]. In Roman Egypt of the first to third centuries CE, as elsewhere in the Roman world, there is no comparable literature of poverty, no comparable ideology of charity and no comparable documented institution in poor-relief. The same seems largely true of Ptolemaic Egypt’ (100).

⁶⁷ Cf. Van Minnen 1995:161.

⁶⁸ As to charities, ‘more than sixty papyri’ have been counted by Serfass 2008:96 (see also 100), and Van Minnen 1995:161 declares that he has collected ‘about seventy-five references to hospitals and related institutions in late antique Egypt including Alexandria’.

record a majority of hospitals founded by private individuals and independent of local ecclesiastical authorities.⁶⁹

Although institutions named *πτωχεῖον* and *πτωχοτροφεῖον* never appear in Greek papyri, the terms more recurring are *νοσοκομεῖον*, that is definitively the most attested one, *ξενοδοχεῖον*, *ξεν(ε)ών* and, more rarely, *ὄσπίτιον*. However, the fact that explicit attestations of *πτωχεῖα* and *πτωχοτροφεῖα* are not found does not necessarily exclude the existence of structures dedicated to the cure of the poor, but it may rather suggest that the function of ‘poorhouses’ was absorbed and carried out by the institutions bearing the aforementioned names.⁷⁰

Final thoughts

The sensitivity to the connection between poverty and illness developed during the rise of Christianity in the 4th century CE and the consequent duty of care for the sick and destitute represented the main factor behind the creation of that well-organized system of health care expressed by the hospital, still one of the most relevant landmarks and outcomes of the history of medicine. To recapitulate and illustrate some intriguing aspects of the relationship between health care and the Christian context, the concrete testimony of a papyrus dating back to the middle of the 6th century can be particularly useful. This curious *specimen* from Oxyrhynchus, *POxy VIII 1150*, preserves an ‘oracle question’ written in the form of a Christian prayer:⁷¹

⁶⁹ Cf. Serfass 2008:101-102: ‘A survey of the papyrological evidence reveals a responsive system of Christian charity in the small cities and even, to some degree, in the villages of the Egyptian *chora*. Episcopal churches superintended philanthropic networks, in which ecclesiastical revenues, often in the form of goods in kind, were regularly distributed to those in need. Laymen and women acted as go-betweens, bridging the gap between the needy and the church administrators who aided them. Charitable institutions, funded through gifts and rents, provided specialized care to the sick, to travelers, to the aged, and the others’. See also Van Minnen 1995:162: ‘Most papyri are documents relating to the financial status of the hospitals [...]. Hospitals receive some donations in kind, but the most important source of money are land and urban property’. Interesting examples of hospitals owned and funded by private individuals are provided by Andorlini & Marcone 2006:27-30.

⁷⁰ Cf. what has been observed by Wipszycka 1972:118 about some of these institutions: ‘On a tendance à traduire les termes de *ξενοδοχεῖον* (*ξενοδοχῖον*), *ξενών* ou *ὄσπίτιον* (*ὄσπίτιν*) sur la base de leur étymologie, par “hôtellerie”, “auberge pour les pèlerins et les voyageurs”. Cependant [...] les maisons de charité ainsi appelées pouvaient être destinées à accueillir non seulement les pèlerins et les voyageurs, mais aussi les malades, les incurables, les vieillards, les orphelins pauvres, les enfants trouvés’.

⁷¹ Cf. Wipszycka 1972:118; Van Minnen 1995:162-163; Andorlini & Marcone 2006:25-26.

+ ὁ θεὸς τοῦ προστάτου ἡμῶν
 τοῦ ἁγίου Φιλοξένου, ἐὰν
 κελεύεις εἰσενεγκεῖν
 εἰς τὸ νοσοκομῖόν σου Ἀνούπ,
 5 δειξὼν τὴν δύναμίν σου
 καὶ ἐξέλθῃ τὸ πιττάκιον.

O God of our patron Saint Philoxenus, if you order to take your (servant)
 Anup to the hospital, show your power and let this piece of papyrus be
 extracted.

This exemplar belongs to the genre of the already mentioned Coptic tickets directed to Saint Colluthus and is one of the few extant papyri in Greek containing Christian oracular requests. Three other papyri from the same century were discovered in Oxyrhynchus, thus evidencing the presence of an oracle in this city: *POxy* VI 925, asking whether it was God's will to undertake a certain journey, *PHarr* I 54 and *POxy* XVI 1926. The last two, concerned with taking over the business of a bank, are of special interest because they are respectively the positive and negative counterpart of the same question.⁷²

These papyri are modelled on the pagan petitions or questions to Greco-Egyptian deities that were left in the temples⁷³ and document the long-lasting practice widespread in Egypt — but found centuries later also elsewhere in the Christian world⁷⁴ — of asking whether it was the divine will to do a certain thing, thus carrying on an old pagan consultation method under a different nomenclature. In the case of *POxy* VIII 1150, the writer addresses the local saint to request his approval to admit Anup to hospital, defining it with the common term νοσοκομεῖον. The use of the verb ἐξέρχομαι, 'to come out', in line 6, concretely suggests the act of taking the πιττάκιον out of a container, viz. 'let this piece of papyrus come out (of the box)' in order to have a positive answer. Exactly like in pagan context, this lets us understand that the box — likely placed on the altar of a church — contained also a similar papyrus sheet with the same question in

⁷² They were written by the same hand and cut from the same sheet with the second with negative phrasing coming immediately under the first, cf. Youtie 1975a:253-257, reprinted in Youtie 1981b:225-229. On Greek and Coptic Christian oracles on papyrus, see also Papaconstantinou 1994:281-286.

⁷³ On the pagan oracle questions on papyrus, see Bülow-Jacobsen 1984:91-92; Kramer 1985:61-62; Papini 1990a:11-20, as well as 1990b:463-469 and 1992:21-27; Bastianini 1994:189-197; Messeri Savorelli & Pintaudi 1996:183-187; Assante 2007:81-102; Gallazzi 2012:331-344.

⁷⁴ Cf. Papaconstantinou 1994:285-286 with references to the sources.

negative form. Also the verb εἰσφέρειν in line 3 is very concrete and connotes the physical transport of the sick to the hospital.

This *specimen* is exceptionally significant since it underscores how the hospitals, aimed at the care and assistance of everyone in need, were socially pervasive in Late Antique Egypt: it is a tangible proof of their local prestige and importance. Furthermore, this papyrus testifies to the coexistence of distinct attitudes in matters of health, at least in Egypt: on the one side, the hospital represents the rational approach to sickness adopted by Church authorities from the 4th century onwards; on the other, the fact that health decisions are left to the will of God informs us on the persistence of religious and ‘supernatural’ systems to approach issues of health and disease even many centuries after the rise of Christianity.

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